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Attorney Docket Number 60 130 1041

DECLARATION FOR UTILITY OR

DES	SIGN		First Named Inventor	Horst H	3öhm		
PATENT A		N	COMPLETE IF KNOWN				
	R 1.63)	L	Application Number	· · · · · · · · · · · · · · · · · · ·			
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Declaration Submitted OR	Declarate Submitte	tion	Art Unit		ŕ		
With Initial Filing		urcharge R 1.16 (e))			· · · · · · · · · · · · · · · · · · ·		
	required		Examiner Name				
I hereby declare that:  Each inventor's residence, mailing address, and citizenship are as stated below next to their name.							
I believe the inventor(s) name which a patent is sought on the	d below to be the invention enti	ne original and first itled:	inventor(s) of the su	bject matter w	hich is claimed and for		
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the specification of which		(Title of the	invention)				
is attached hereto							
OR							
	~ [·		as United States	Application N	umber or PCT international		
OR was filed on (MM/DD/Y	YYY) [·		as United States	Application N	umber or PCT International		
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[Page 1 of 2]

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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:	Custome	er Number:	0260	96		OR	Corresp	ondence address below
Name Anna M. Shih		<u> </u>			<del></del> -			
Address 400 West Maple Road, Suite 350								
City Birmingham				State	MI			48009
Country United States		Telephone (248) 98		)		Fax (248) 98	38-836	3
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST IN	VENTOR:		□ ар	etition ha	as bee	en filed for this	s unsign	ed inventor
Given Name (first and middle [if any]) Horst					Family Name or Surname Böhm			
Inventor's Signature	Com			,				Date // - 03 - 03
Residence: City Frankfurt	State	•	·	Country	•		Citizen Germ	•
Mailing Address Offenbacher Landstrasse 537								
City Frankfurt	State			Ž	ZIP 6059	9	1	Country Germany
NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])	r		-			mily Name Surname Gr	imm	
Inventor's Signature	mm							Date 11-03-03
Residence: City Frankfurt	State			Country	-		Citizen Germ	•
Mailing Address Sachsenhäuser, Landwehrweg 225								
Citv Frankfurt	State				IP 50599		Countr	•
Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.								

sign (+) inside this box 

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## **DECLARATION**

## **REGISTERED PRACTITIONER INFORMATION** (Supplemental Sheet)

M. Lee Murrah Pete N. Kiousis 41,117 Theodore W. Olds John E. Carlson David J. Gaskey 37,139 Kerrie A. Laba 42,777 William S. Gottschalk David L. Wisz 46,350 Karin H. Butchko John M. Siragusa Anthony P. Cho Anna M. Shih 47,209 Anna M. Shih	Name	Registration Number	Name	Registration Number
	Pete N. Kiousis Theodore W. Olds John E. Carlson David J. Gaskey Kerrie A. Laba William S. Gottschalk David L. Wisz Karin H. Butchko John M. Siragusa Anthony P. Cho	27,460 41,117 33,080 37,794 37,139 42,777 44,130 46,350 45,864 46,174 47,209		
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DECLARATION		ADDITIO Supplemen		NVENTOR(S)	Page —— of ———		
Name of Additional Joint Inventor, if any:		☐ A peti	ition h	nas been filed for this	unsigned in	ventor	
Given Name (first and middle (if any)		Family Nam			-,g.,	-	
Manfred		Röhnke	6 OI C	Suriame			
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Name of Additional Joint Inventor, if any:		☐ A peti	ition h	nas been filed for this	unsigned inv	ventor	
Given Name (first and middle (if any)				Family Name or	Sumame		
Inventor's Signature		Date					
Residence: City	State	•		Country	-	Citizenship	
Mailing Address							
Mailing Address							
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Name of Additional Joint Inventor, if any:		A peti	tion h	nas been filed for this	unsigned inv	ventor	
Given Name (first and middle (if any)				Family Name or S	Sumame		
				•			
Inventor's Signature		Date					
Residence: City	State			Country		Citizenship	
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City	State			Zip	Country		

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